Major Donor and		COMMITTEE STATE				
Independent Expenditure Com Campaign Statement (Government Code Sections 84200-84216.5)	or print in ink.	Date Stamp	CALIFORNIA FORM	461		
☐ Amendment	Statement covers period	Date of election if applicable: (Month, Day,Year)		1/2 For Official	Use Only	
SEE INSTRUCTIONS ON REVERSE	through06/30/2009	.				
1. Name and Address Of Filer		3. Summary		•		
NAME OF FILER (Include name(s) of all affiliated entities whose cor California State Parks Foundation	ntributions are included in this statement.)	(Amounts may be rounded to with the contract of the contract o	tributions 00 or more		400000	
MAILING ADDRESS	(NO. AND STREET)	made this period. (Par	t 5.)	\$ <b>—</b>	100000.00	
CITY	STATE ZIP CODE	2. Unitemized expenditule contributions (includin \$100 made this period	g loans) under	\$ —	0.00	
San Francisco RESPONSIBLE OFFICER (If filer is other than an individual) Elizabeth Goldstein	CA 94133  AREA CODE/DAYTIME PHONE	3. Total expenditures and made this period. (Add 4. Total expenditures and	d contributions d Lines 1 + 2.)		100000.00	
2. Nature and Interests of Filer (C	NAME, ADDRESS, AND BUSINESS INTERESTS ME, ADDRESS, AND NATURE OF THE BUSINESS	made from prior stater amount from Line 5 o filed. If this is the firs the calendar year, ent	f last statement t statement for	¢	0.00	
NAME OF EMPLOYER/BUSINESS	BUSINESS INTERESTS	5. Total expenditures and (including loans) made	d contributions	ψ —		
ADDRESS OF EMPLOYER/BUSINESS	1	January 1 of the curre (Add Lines 3 + 4.)	nt calendar year.	TOTAL \$	100000.00	
A FILER THAT IS A BUSINESS ENTITY MUST DESENGAGED  A FILER THAT IS AN ASSOCIATION MUST PROVI		4. Verification  I have used all reasonable reviewed the statement a contained herein is true a the laws of the State of C	nd to the best of my kr nd complete. I certify	nowledge the infor under penalty of p	mation perjury under	
A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS COMMON ECONOMIC INTEREST OF THE GROUP		Executed on	SI	Goldstein IGNATURE OF INDIVIDUAL D IBLE OFFICER IF OTHER TH		
Non-Profit Organization						

## Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.
Amounts may be rounded to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND	į
MAJOR DONOR COMMITTEE STATEMENT	•

Statement covers period		CALIFORNIA	461	
from	01/01/2009	FORM 40		
through	06/30/2009	2/2		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

California State Parks Foundation

5. C	Contributions	(Including L	oans, Forgive	ness of Loans	, and Loan	<b>Guarantees</b> )	and Expei	nditures l	Made
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(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
03/20/2009	California Conservation Action Fund  Los Angeles CA 90017  ID: 1272719 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		NO:  ☑ Support ☐ Oppose	100000.00	\$ Calendar Year  \$ 100000.00  Other

SUBTOTAL \$

100000.00